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## BIB DATA SHEET

CONFIRMATION NO. 6430

<b>SERIAL NUMBER</b> 10/540,082	<b>FILING or 371(c) DATE</b> 12/28/2006 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 2125	<b>ATTORNEY DOCKET NO.</b> P03242		
<b>APPLICANTS</b> John Wadding, Waterford, IRELAND; Robert Duggan, Kilkenny, IRELAND; Trevor O'Neill, Waterford, IRELAND; David Sheppard, Waterford, IRELAND; Gabriel Philip Kennedy, Waterford, IRELAND; Michael W. Murphy, Waterford, IRELAND; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/14547 12/18/2003 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0229577.2 12/19/2002 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/20/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /CHAD RAPP/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance cjr Initials	<b>STATE OR COUNTRY</b> IRELAND	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Bausch & Lomb Incorporated One Bausch & Lomb Place Rochester, NY 14604-2701 UNITED STATES						
<b>TITLE</b> Contact lens manufacture						
<b>FILING FEE RECEIVED</b> 1390	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		